## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450



or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where in m

ppropriate. All further ndicated unless correct naintenance fee notifica	ed below or directed otl	ng the Patent, advance on nerwise in Block 1, by (a	rders and notification of n a) specifying a new corres	naintenancè fees v pondence address;	vill be n ; and/or	nailed to the current (b) indicating a sepa	correspondence address rate "FEE ADDRESS" f	as or
CURRENT CORRESPOND	Fee(	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
2292		/2007 .		Cer	tificate	of Mailing or Trans	mission	
PO BOX 747	'ART KOLASCH CH, VA 22040-0747	I he State addr trans	reby certify that thes Postal Service we essed to the Mail smitted to the USP	is Fee(s vith suff I Stop I TO (571	Transmittal is being icient postage for firs SSUE FEE address ) 273-2885, on the day	deposited with the Unite to class mail in an envelog above, or being facsimi ate indicated below.	ed se le	
	•				· ·		(Depositor's name	٦ .
							(Signature	:)
							(Date	:)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.	7
10/079,513 02/22/2002		•	Laurent Alain Najman		0142-0380P-SP		6434	_
ITLE OF INVENTION	I: AUTOMATIC TABLI	E LOCATING TECHNIQ	UE FOR DOCUMENTS			·		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	E FEE	TOTAL FEE(S) DUE	DATE DUE	]
nonprovisional	NO	\$1400	\$300	\$0		\$1700	06/25/2007	_
EXAMINER		ART UNIT	CLASS-SUBCLASS	06/25/2007 AUCHDAF2 00000126 02 01 FC:1501 1400.03 DA 02 FC:1504 300.00 DA		2448 10079513		
CONOVER, DAMON M		2624	382-199000			300.00 DA		_
Change of correspondence address or indication of "Fee Address" (37 FR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to or agents OR, alternativ (2) the name of a single registered attorney or a	of a single firm (having as a member a member a 2				
PLEASE NOTE: Uni recordation as set fort (A) NAME OF ASSIG OCE Print L S.A.	less an assignee is ident h in 37 CFR 3.11. Comp GNEE Logic Technolo	ified below, no assignee oletion of this form is NO gies	THE PATENT (print or typedata will appear on the part a substitute for filing and (B) RESIDENCE: (CITY Venlo, The inted on the patent):	and STATE OR C	OUNTF	RY)		
						* *****		<del>-</del>
a. The following fee(s)  Issue Fee  Publication Fee (N  Advance Order - 1	No small entity discount p	<ul> <li>Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)</li> <li>A check is enclosed.</li> <li>Payment by credit card. Form PTO-2038 is attached.</li> <li>The Director is hereby authorized to charge; the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 02-2448 (enclose an extra copy of this form).</li> </ul>						
a. Applicant claim	tus (from status indicated s SMALL ENTITY statu	s. See 37 CFR 1.27.	☐ b. Applicant is no long					_  in
		tes Patent and Trademark		e appricant, a regi	siciou at	or agont, or th	a accordance of other party	_
Authorized Signature  Typed or printed name		. Stewart	£ #40,953	Date J		22, 2007 21,066		
his collection of inform	ation is required by 37 C tiality is governed by 35 d application form to the ions for reducing this bur irginia 22313-1450. DC	FR 1.311. The informatic U.S.C. 122 and 37 CFR	n is required to obtain or re 1.14. This collection is esti depending upon the indivi- e Chief Information Office COMPLETED FORMS TO	etain a benefit by the	he public	to complete, includin	g gathering, preparing, ar	าด

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.